Attorney Docket No. \_\_\_

## BIRCH, STEWART, KOLASCH & BIRCH, LLP

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING P.O. Box 747 • Falls Church, Virginia 22040-0747 Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

## COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT AND DESIGN APPLICATIONS

As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated next to my name; that I verily believe that I am the original, first and sole inventor (if only one inventor is named below) or an original, first and joint inventor (if plural inventors are named below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Insert Title:	SUPPLEMENT PREPARATION							
Fill in Appropriate			t attached hereto, the	application is identified by the a	attorney docket r	number as set		
	forth above and/or the							
Information -	The specification v	vas filed on				as		
For Use Without Specification	and amended on		(if applicable) and/or					
Attached:	the specification w	as filed on		as PCT				
Tituerica.	International Appl	lication Number		; and was				
	amended on				(if applicable)			
Insert Priority Information: (if appropriate)	amended by any amenc I acknowledge the Regulations, §1.56. I do not know and thereof, or patented or year prior to this application date of this application representative or assign patent or inventor's cer application by me or m I hereby claim for or inventor's certificate	Iment referred to above. e duty to disclose inform do not believe the same v described in any printed cation, that the same was n, that the invention has n n in any country foreign as more than twelve mon tificate on this invention l y legal representatives or a eign priority benefits und listed below and have also of the application on whice ation(s)	vas ever known or use publication in any co not in public use or ot been patented or not to the United State this (six months for done has been filed in any assigns, except as folic errors of the United State that the six months for done has been filed in any assigns, except as folic errors of the six months for done has been filed in any assigns, except as folic errors of the six months for done has been filed below any the priority is claimed:	of the above-identified specificatial to patentability as defined and in the United States of Americantry before my or our inventor on sale in the United States of nade the subject of an inventor is of America on an application country foreign to the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application for patent of the United States Code, \$119(a)-(d) of any for foreign application foreign application foreign application foreign a	in Title 37, Cocca before my or of ion thereof or my or filed by me of the thereof or inventor invento	de of Federal our invention tore than one han one year ed before the or my legal oplication for prior to this a(s) for patent dicate having Claimed No No		
	(Number)	(Country)		onth/Day/Year Filed)	☐ Yes	□ No		
	(Number) (Country) (Month/Day/Year F I hereby claim the benefit under Title 35, United States Code, §119(e) of any United State							
Insert Provisional Application(s): (if any)	(Application Number)			(Filing Date)		<del></del>		
	(Application Number) (Filing Date)					<del></del>		
	All Foreign Applications, if any, for any Patent or Inventor's Certificate Filed More than 12 Months (6 Months for Designs) Prior to the Filing Date of This Application:							
	Country	Applicat	ion Number	Date of Filing (Month	n/Day/Year)			
Insert Requested Information: (if appropriate)								
	I hereby claim the benefit under Title 35, United States Code, §120 of any United States and/or PCT application(s), including fo continuation-in-part application(s) listed below and, insofar as the subject matter of each of the claims of this application is no disclosed in the prior United States and/or PCT application in the manner provided by the first paragraph of Title 35, United State Code, §112, I acknowledge the duty to disclose information which is material to the patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PC international filing date of this application.							
Insert Prior U.S. Application(s): (if any)	(Application Number)	(Filing D	ate)	(Status - patented, pe	nding, abandone	ed)		
Page 1 of 2 (Rev. 05/2004)	(Application Number)	(Filing D	ate)	(Status - patented, pe	nding, abandone	ed)		

Attorney	Docket No.	
Amornev	Docket Ino.	

I hereby appoint the practitioners at CUSTOMER NO. 02292 as my attorneys or agents to prosecute this application and/or an international application based on this application and to transact all business in the United States Patent and Trademark Office connected therewith and in connection with the resulting patent based on instructions received from the entity who first sent the application papers to the practitioners, unless the inventor(s) or assignee provides said practitioners with a written notice to the contrary:

Send Correspondence to:

## CUSTOMER NO. 02292 (BIRCH, STEWART, KOLASCH & BIRCH, LLP)

Telephone: (703) 205-8000 • Facsimile: (703) 205-8050

PLEASE NOTE: YOU MUST COMPLETE THE FOLLOWING:

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1	such winds fall for the value of the application of						
Full Name of First or Sole Inventor: nsert Name of Inventor nsert Date This Document is Signed	GIVEN NAME/FAMILY NAME Jørn Oddershede THOMSEN	INVENTOR'S SIGNATURE	men DATE	-1-06			
nsert Residence insert Citizenship →	Residence (City, State & Country) Rævskærvej 21, Tornby	DK-9850 Hirtshals					
nsert Post Office Address →	MAILING ADDRESS (Complete Street Address including City, State & Country) Rævskærvej 21, Tornby DK-9850 Hirtshals						
Full Name of Second Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE	*			
	Residence (City, State & Country)	CITIZENSHIP					
	MAILING ADDRESS (Complete Street Add	ress including City, State & Country)					
Full Name of Third Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE	*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Add	ress including City, State & Country)					
Full Name of Fourth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE	*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Fifth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE	*			
	Residence (City, State & Country)	CITIZENSHIP					
	MAILING ADDRESS (Complete Street Address including City, State & Country)						
Full Name of Sixth Inventor, if any: see above	GIVEN NAME/FAMILY NAME	INVENTOR'S SIGNATURE	DATE	*			
	Residence (City, State & Country)		CITIZENSHIP				
	MAILING ADDRESS (Complete Street Add	ress including City, State & Country)					

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\*DATE OF SIGNATURE